



**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/642,809
Filing Date	08/15/03
First Named Inventor	Herbert E.M. Viggh
Art Unit	2877
Examiner Name	(not assigned)
Attorney Docket Number	AFB 634

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record.  
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
 the address associated with Customer Number  

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

The attorney of record is retiring as of 28 August 2006.

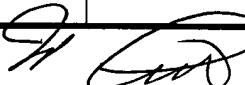
**CORRESPONDENCE ADDRESS**

1.  The correspondence address is NOT affected by this withdrawal.
2.  Change the correspondence address and direct all future correspondence to:

The address associated with Customer Number:

**26902**

OR

<input type="checkbox"/>	Firm or Individual Name		
Address			
City		State	Zip
Country			
Telephone		Email	
Signature			
Name	William G. Auton	Registration No.	31,320
Date	7/18/06	Telephone No.	(781) 377-4072

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.